lame (print) Office (if	f applicable)			District (if applicable)
1120 Connecticut Ave NW Washington DC 2003 lailing Address (include city and zip code)		202-	-326-1400 Telephone No.	
-Mail Address cfines@emily	yslist.org			
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Annual Filing - Due January 15, 20 Period: January 1, 2003 - December 31, 2003	04			
			1,001	FILE
Report #1 — Due August 31, 2004 cumbents in an Office with a 4-year term Period: Jan. 5,				2 I be be
cumbents in an Office with a 6-year term Period: Dec. 20	2001 — Aug 26, 2 ), 1998 — Aug 26,	2004	nr	T <b>2 6</b> 2004
	2004 – Aug. 26, 20 , 2002 – Aug 26, 20		<b>!</b>	
Report #2 Due — October 26, 2004	•		DE	AN HELLER JARYSQFILSTAT
	7, 2004 — Oct. 21,	2004	SECTOR	6ABEUSPERLSTAT
Report #3 Due — January 15, 2005*				
	, 2004 — Dec. 31, , 2004 <i>-</i> Dec. 5, 2(			
Annual Filing – Due January 15, 2005			•	
Period: January 1, 2004 - December 31, 200	)4	al Baix and M		
Third Report suffices for 2005 Annual Filing if can	wate BISO file	a Keport Nos.	ı and 2	
				പ്രി അസ്വരായം
A COMPANION SUNIVARY		SOLVE TO		
			(jajin Pote)	
				Recording Potod
Total Monetary Contributions Received in Excess o	of \$100		7462.90	9962.90
2. Total Monetary Contributions Received of \$100 or L	Less		2975.0	0 2975.00
	madaicil.	Gumulative From		
		Report Polon (1)		
		ini koomo		•
3. Total Amount of Monetary Contributions	1			
Received (Add Lines 1 and 2)			10437.90	12937.90
Total Value of In Kind Contributions Received in Excess of \$100	.00	.00		
Excess of \$100	1			
MERNE CARREST	SESSUMM/	NRY/SYSTEM		
5. Total Monetary Expenses Paid in Excess of \$100		_	10437.90	12937.90
6. Total Monetary Expenses Paid of \$100 or Less			.00	.00
7. Total Amount of All Monetary Expenses Paid (Add Lines 5 and 6)			10437.90	12937.90
Total Value of In Kind Expenses in Excess     of \$100	1937.90	1937.90		
01 \$100 _	1931.90	1007.00		
	FERMANIO	N 2002 (	Ail of a line	
Declare Under Penalty of Perjury That the Foregoing is	s True and Com	ect.		
			,	
Carreno times			10/25	104
			Date	

EMILY's List - NV

Name (print)

Office (if applicable)

District (if applicable)

## Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 3 of Contributions Summary

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Chavez & Gertler 42 Miller Ave Mill Valley, CA 94941	09/07/04	250.00	·
A - Z Womens Center 1670 E Flamingo Las Vegas, NV 89119	9/7/04	500.00	
Kathleen Langford Langford Insurance Agency 11205 S Dixie Highway Miami, FL 33156	09/07/04	1000.00	
Rosemary Reed 1424 16th Street Washington, DC 20036	10/13/04	1,000.00	
Carlos Ortiz 1 CVS Drive Woonsocket RI, 02895	10/13/04	1,250.00	
Beth Leytham 5206 N Suwanee Ave Tampa, FL 33603	10/13/04	200.00	
Getrude Kasle PO Box 4039 Sarasota, FL 34230	10/13/04	250.00	
Owen Hughes 450 W 31st Street New York, NY 10001	10/13/04	250.00	
Valerie Blatnik Sigel Pfizer Inc New York, NY 10017	10/13/04	1375.00	
3 D Star Insurance 1509 Washington Ave St Louis, MO 63103	09/07/04	187.90	
Laurel Bellows 79 W Monroe #800 Chicago, IL 60603	10/06/04	1000.00	
Ann Ratner 2815 Hartland Rd Falls Church, VA 22043	10/06/04	200.00	
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			<u>.</u>

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EMILY's List - NV Name (print)

Office (if applicable)

District (if applicable)

## Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 9 of Expenses Summary

NAME AND ADDRESS OF AND ADDRESS OF AND ADDRESS OF AND ADDRESS OF A ADD	EVALIEGORY (EGOROVEGIA) (URSE VARE	(한) 제국이라는 (G.) (한국(당본	AMAUMIT OF EACHEMENTE
Elect Susan Gerhardt 2245 North Green Valley Parkway Henderson, NV 89014	J	10/07/04	2500.00
Peggy Pierce for Assembly 5304 Gripsy Avenue Las Vegas, NV 89107	J	10/07/04	1000.00
Re Elect Kathy McIain 2457 Swan Lane Las Vegas, NV 89121	J	10/14/04	1500.00
Dina Titus for State Senate 1637 Travis Circle Las Vegas, NV 89119	J	10/14/04	1000.00
RE Elect Barbara Buckley 5442 Holbrook Drive Las Vegas, NV 89103	J	10/14/04	2500.00
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Name (print)

Office (if applicable)

District (if applicable)

## **IN KIND**

## Expenses in Excess of \$100 Transfer Total Value of All In-Kind Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF		· · · · · · · · · · · · · · · · · · ·		٦
PERSON, GROUP OR	DESCRIPTION	DATE OF	VALUE OR COST	
ORGANIZATION WHO RECEIVED	OF EACH	EACH		
THE IN KIND GOOD(S) OR	IN KIND		OF EACH	
SERVICE(S)	EXPENSE	IN KIND	IN KIND	
		EXPENSE	EXPENSE	
		haranta da		
Ruth Steinmetz	Inkind	9/8/04	lann en	
2310 chestnut #14	Staff	10101	1032.55	O Low State
San Francisco, CA94/A	φ 0		IK to S. Weit	per for
Guardian	Inkind	9101016	0	NV-10
PO BOX 9570 &	Health	9/8/04	89.28 <u> </u>	
Chicago, 11 60694	Insurance	エド	1032.53 IK to S. Weit 89.28 to S. Weitzel	for Rep NV-10
Unum	Inkind			
PO BOX 466990	Life-Fascran	e 9/8/04	3.46	
Atlanta, GA 30384		ΣK	3.46 to S. Weitzel	for Rep NV-10
American Express	Inkind			
Po Box \$6000   3333/	Travel	9/8/00	442.44	3,7,2
At Lauderdale, FL 33336		1,010 7	442.44 to s. weitzel	for Rep NV-10
American Express	In Kind		100 01	1
PO Box 360001	Travel	958/04	180.81	11-10
Ft Lauderdale, FC \$8336	ITAGE	±K	180.81 to S. Weitzel	for Rep N.
American Express	Inkina		11150	1
PO BOX 360001	Tioned	9/0/04	41,52	Mary A
Ft Lauderdale, FL 33336	· · · · · · ·	1010 Jak	to s. Weitzel	for Rep NV
American Express	in kind		147.86	10
PO BOX 360001	Travel	9/8/04	141.00	
Ft Lauderdale, FL 33336	11,410	IK	to S. Weitzel fo	KEP NY-10
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Prescribed by Secretary of State NRS 294A.120, 294A.125, 294A.140, 294A.150, 294A.160 294A.200, 294A.210, 294A.220, 294A.362

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